

Approved For Release 2006/05/25 : CIA-RDP81B00879R000900040083-2
Relevant to PURCHASES AND
SERVICES OTHER THAN PERSONAL

O. Vou. No. _____
Bu. Vou. No. _____

U. S. _____ U. S. Government
(Department, bureau, or establishment)
Voucher prepared at Rochester, New York November 28, 1958
(Give place and date)
THE UNITED STATES, Dr., Payee's Account No. Z-1893
To Eastman Kodak Company
(Payee)
343 State Street, Rochester 4, New York
(Address) (City) (State)

PAID BY
Enc 1
DPS-6219
COPY 1 OF 2
(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
	10/6/58 through 11/2/58	Direct Charges				6,013.	00 ✓
		1958 Provisional Overhead				208.	66 ✓
		1958 Provisional G & A Expense				248.	87 ✓
		Fixed Fee				340.	05 ✓
Use continuation sheet(s) if necessary						Total	6,810.58

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total _____

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

(Payee must NOT use this space)

Differences _____

Date 11/28/58 *Payee Eastman Kodak Company
25X1A _____

This certificate not required when a like certificate is made by payee on attached bill or bills)

A & O Division

Title Comptroller

Amount verified; correct for

(Signature or initials) *EE*

6,810.58

Contract No. 1893 Date 7/11/57 Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____ (Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)						
Appropriation, limitation, or project symbol	Appropriation title				Limit'n. or Proj't. Amount	Appropriation Amount
Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____ on _____, 19____ Payee _____
(Sign original only)

1998 DEC 12 AM 9:33

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